

UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF NEW YORK

In re:

Case No.

Charise Lavon Harrell

1-18-41756

Chapter 15

Debtor(s)

AFFIDAVIT PURSUANT TO LOCAL RULE 1007-1(b)

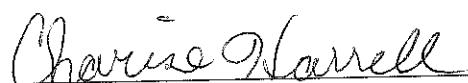
Charise Lavon Harrell, undersigned debtor herein, swears as follows:

1. Debtor filed a petition under chapter 15 of the Bankruptcy Code on 3/30/18.
2. Schedule(s) A-J were not filed at the time of filing of the said petition, and is/are being filed herewith.
3. [Check applicable box]:
  - The schedules filed herewith reflect no additions or corrections to, or deletions from, the list of creditors which accompanied the petition.
  - Annexed hereto is a listing of names and addresses of scheduled creditors added to or deleted from the list of creditors which accompanied the petition. Also listed, as applicable, are any scheduled creditors whose previously listed names and/or addresses have been corrected. The nature of the change (addition, deletion or correction) is indicated for each creditor listed.
4. [If creditors have been added] An amended mailing matrix is annexed hereto, listing added creditors ONLY, in the format prescribed by Local Rule 1007-3.

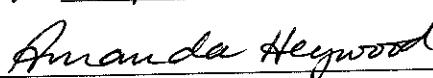
*Reminder: No amendment of schedules is effective until proof of service in accordance with EDNY LBR 1009-1(b) has been filed with the Court.*

Any additions to the list of creditors which accompanied the petition will be deemed an amendment to that list; if this amendment is filed prior to the expiration of the time period set forth in Fed. R. Bankr. P. 4004 and 4007, it will be deemed to constitute a motion for a 30-day extension of the time within which any added creditors may file a complaint to object to the discharge of the debtor and/or to determine dischargeability. This motion will be deemed granted without a hearing if no objection is filed with the Court and served on debtor within 14 days following filing of proof of service of this affirmation, all attachments and the amended schedules in accordance with EDNY LRB 1009-1.

Dated:

4/19/18

  
Debtor (signature)

Sworn to before me this 19  
day of April, 2018

  
Amanda Heywood  
Notary Public, State of New York

AMANDA HEYWOOD  
Notary Public, State of New York  
No. 04HE6193922  
Qualified in Kings County  
Commission Expires September 22, 2020

**Fill in this information to identify your case:**

Debtor 1 First Name	Charise	Middle Name	LaVon	Last Name	Harrell
Debtor 2 (Spouse, if filing) First Name					Middle Name
United States Bankruptcy Court for the: East District of New York					
Case number (if known)	1-18-41756-nhl				

CLERK  
U.S. BANKRUPTCY COURT  
EASTERN DISTRICT OF  
NEW YORK

2018 APR 19 P 2:37

Check if this is an  
amended filing

RECEIVED

## Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

#### Part 1: Summarize Your Assets

Your assets	
Value of what you own	
1. Schedule A/B: Property (Official Form 106A/B)	\$ 282.00
1a. Copy line 55, Total real estate, from Schedule A/B.....	\$ 282.00
1b. Copy line 62, Total personal property, from Schedule A/B.....	\$ 0
1c. Copy line 63, Total of all property on Schedule A/B .....	\$ 282.00

#### Part 2: Summarize Your Liabilities

Your liabilities	
Amount you owe	
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	\$ 182,578.40
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D.....	\$ 182,578.40
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F.....	\$
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.....	+ \$ 34,513.38
	Your total liabilities
	\$ 217,091.78

#### Part 3: Summarize Your Income and Expenses

4. Schedule I: Your Income (Official Form 106I)	\$ 362
Copy your combined monthly income from line 12 of Schedule I .....	
5. Schedule J: Your Expenses (Official Form 106J)	\$ 291
Copy your monthly expenses from line 22c of Schedule J .....	

Debtor 1 Charise Lavor Harrell  
 First Name Middle Name Last Name

Case number (if known) 1-18-41756-nhl

**Part 4: Answer These Questions for Administrative and Statistical Records**

**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  
 Yes

**7. What kind of debt do you have?**

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

**8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.**

\$ 362

**9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

**Total claim**

**From Part 4 on Schedule E/F, copy the following:**

- |  |                            |
|--|----------------------------|
| 9a. Domestic support obligations (Copy line 6a.)   | \$ _____                   |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$ <u>34,513.38</u>        |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$ _____                   |
| 9d. Student loans. (Copy line 6f.)   | \$ <u>7,432</u>            |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ _____                   |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | + \$ _____                 |
| <b>9g. Total. Add lines 9a through 9f.</b>   | <b>\$ <u>41,945.38</u></b> |

**Fill in this information to identify your case and this filing:**

Debtor 1 First Name	Charise	Middle Name	Lavon	Last Name	Harrell
Debtor 2 (Spouse, if filing) First Name		Middle Name		Last Name	
United States Bankruptcy Court for the: <u>East</u>		District of <u>New York</u>			
Case number <u>1-18-41756-nhl</u>					

Check if this is an amended filing

## Official Form 106A/B

### Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

##### 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.

Yes. Where is the property?

1.1. 34 Layton Avenue  
Street address, if available, or other description

Staten Island NY 10301  
City State ZIP Code

Richmond  
County

**What is the property?** Check all that apply.

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$282,000 \$ 1/3

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

inheritance

Check if this is community property (see instructions)

If you own or have more than one, list here:

1.2. 34 Layton Avenue  
Street address, if available, or other description

Staten Island NY 10301  
City State ZIP Code

Richmond  
County

**What is the property?** Check all that apply.

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$282,000 \$ 1/3

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

inheritance

Check if this is community property (see instructions)

Debtor 1 Charise Laron Harrell

First Name

Middle Name

Last Name

Case number (if known) 1-18-41756-nhl

1.3.

Street address, if available, or other description

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

County \_\_\_\_\_

**What is the property? Check all that apply.**

- Single-family home  
 Duplex or multi-unit building  
 Condominium or cooperative  
 Manufactured or mobile home  
 Land  
 Investment property  
 Timeshare  
 Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ \_\_\_\_\_ \$ \_\_\_\_\_

Describe the nature of your ownership interest (such as fee simple, tenancy by the entirety, or a life estate), if known.

**Who has an interest in the property? Check one.**

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

 Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number: \_\_\_\_\_

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. ..... →

\$ \_\_\_\_\_

**Part 2: Describe Your Vehicles**

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

**3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**

- No  
 Yes

3.1. Make: \_\_\_\_\_

Model: \_\_\_\_\_

Year: \_\_\_\_\_

Approximate mileage: \_\_\_\_\_

Other information:

--

**Who has an interest in the property? Check one.**

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ \_\_\_\_\_ \$ \_\_\_\_\_

If you own or have more than one, describe here:

3.2. Make: \_\_\_\_\_

Model: \_\_\_\_\_

Year: \_\_\_\_\_

Approximate mileage: \_\_\_\_\_

Other information:

--

**Who has an interest in the property? Check one.**

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ \_\_\_\_\_ \$ \_\_\_\_\_

Debtor 1

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Last Name \_\_\_\_\_

Case number (*if known*) \_\_\_\_\_

3.3. Make: \_\_\_\_\_

Model: \_\_\_\_\_

Year: \_\_\_\_\_

Approximate mileage: \_\_\_\_\_

Other information: \_\_\_\_\_  
\_\_\_\_\_**Who has an interest in the property? Check one.**

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

**Current value of the entire property? Current value of the portion you own?**

\$ \_\_\_\_\_ \$ \_\_\_\_\_

**Who has an interest in the property? Check one.**

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

**Current value of the entire property? Current value of the portion you own?**

\$ \_\_\_\_\_ \$ \_\_\_\_\_

3.4. Make: \_\_\_\_\_

Model: \_\_\_\_\_

Year: \_\_\_\_\_

Approximate mileage: \_\_\_\_\_

Other information: \_\_\_\_\_  
\_\_\_\_\_**Who has an interest in the property? Check one.**

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

**4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

 No Yes

4.1. Make: \_\_\_\_\_

Model: \_\_\_\_\_

Year: \_\_\_\_\_

Other information: \_\_\_\_\_  
\_\_\_\_\_**Who has an interest in the property? Check one.**

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

**Current value of the entire property? Current value of the portion you own?**

\$ \_\_\_\_\_ \$ \_\_\_\_\_

If you own or have more than one, list here:

4.2. Make: \_\_\_\_\_

Model: \_\_\_\_\_

Year: \_\_\_\_\_

Other information: \_\_\_\_\_  
\_\_\_\_\_**Who has an interest in the property? Check one.**

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

**Current value of the entire property? Current value of the portion you own?**

\$ \_\_\_\_\_ \$ \_\_\_\_\_

**5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here** →

\$ \_\_\_\_\_

Debtor 1 Charise Lavon Harrell

First Name

Middle Name

Last Name

Case number (if known) 1-18-41756-nhl**Part 3: Describe Your Personal and Household Items****Do you own or have any legal or equitable interest in any of the following items?****Current value of the portion you own?****Do not deduct secured claims or exemptions.****6. Household goods and furnishings***Examples: Major appliances, furniture, linens, china, kitchenware* No Yes. Describe.....

--	--

\$ \_\_\_\_\_

**7. Electronics***Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games* No Yes. Describe.....

--	--

\$ \_\_\_\_\_

**8. Collectibles of value***Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles* No Yes. Describe.....

--	--

\$ \_\_\_\_\_

**9. Equipment for sports and hobbies***Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments* No Yes. Describe.....

--	--

\$ \_\_\_\_\_

**10. Firearms***Examples: Pistols, rifles, shotguns, ammunition, and related equipment* No Yes. Describe.....

--	--

\$ \_\_\_\_\_

**11. Clothes***Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories* No Yes. Describe.....

--	--

\$ \_\_\_\_\_

**12. Jewelry***Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver* No Yes. Describe.....

--	--

\$ \_\_\_\_\_

**13. Non-farm animals***Examples: Dogs, cats, birds, horses* No Yes. Describe.....

--	--

\$ \_\_\_\_\_

**14. Any other personal and household items you did not already list, including any health aids you did not list** No Yes. Give specific information.....

--	--

\$ \_\_\_\_\_

**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here** →\$ 0

Debtor 1 Charise Laron Harrell

First Name

Middle Name

Last Name

Case number (if known)

1-18-41756-nhl

**Part 4: Describe Your Financial Assets****Do you own or have any legal or equitable interest in any of the following?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**16. Cash***Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition* No Yes .....

Cash: ..... \$ .....

**17. Deposits of money***Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.* No Yes .....

Institution name:

17.1. Checking account:

4830 6127 9468\$ 0.94

17.2. Checking account:

4830 7164 0935\$ -2.99

17.3. Savings account:

 \$  

17.4. Savings account:

 \$  

17.5. Certificates of deposit:

 \$  

17.6. Other financial account:

 \$  

17.7. Other financial account:

 \$  

17.8. Other financial account:

 \$  

17.9. Other financial account:

 \$  **18. Bonds, mutual funds, or publicly traded stocks***Examples: Bond funds, investment accounts with brokerage firms, money market accounts* No Yes .....

Institution or issuer name:

   
   
 \$    
\$    
\$  **19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture** No Yes. Give specific information about them.....

Name of entity:

% of ownership:

0% %

\$ .....

0% %

\$ .....

0% %

\$ .....

Debtor 1

Charise Laron Harrell

First Name

Middle Name

Last Name

Case number (if known)

1-18-41756-nhl**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.  
*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

 No Yes. Give specific information about them.....

Issuer name:

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\$ \_\_\_\_\_  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_
**21. Retirement or pension accounts**

*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

 No Yes. List each account separately. Type of account: Institution name:

401(k) or similar plan: \_\_\_\_\_

\$ \_\_\_\_\_

Pension plan: \_\_\_\_\_

\$ \_\_\_\_\_

IRA: \_\_\_\_\_

\$ \_\_\_\_\_

Retirement account: \_\_\_\_\_

\$ \_\_\_\_\_

Keogh: \_\_\_\_\_

\$ \_\_\_\_\_

Additional account: \_\_\_\_\_

\$ \_\_\_\_\_

Additional account: \_\_\_\_\_

\$ \_\_\_\_\_

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

 No Yes .....

Institution name or individual:

Electric: \_\_\_\_\_

\$ \_\_\_\_\_

Gas: \_\_\_\_\_

\$ \_\_\_\_\_

Heating oil: \_\_\_\_\_

\$ \_\_\_\_\_

Security deposit on rental unit: \_\_\_\_\_

\$ \_\_\_\_\_

Prepaid rent: \_\_\_\_\_

\$ \_\_\_\_\_

Telephone: \_\_\_\_\_

\$ \_\_\_\_\_

Water: \_\_\_\_\_

\$ \_\_\_\_\_

Rented furniture: \_\_\_\_\_

\$ \_\_\_\_\_

Other: \_\_\_\_\_

\$ \_\_\_\_\_

**23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)** No Yes .....

Issuer name and description:

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\$ \_\_\_\_\_  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_

Debtor 1 Charise Laron Farrell

First Name

Middle Name

Last Name

Case number (if known) 1-18-41756-nhl**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

 No Yes .....

Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

_____	\$ _____
_____	\$ _____
_____	\$ _____

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit** No Yes. Give specific information about them....

_____	\$ _____
-------	----------

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

 No Yes. Give specific information about them....

_____	\$ _____
-------	----------

**27. Licenses, franchises, and other general intangibles**

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

 No Yes. Give specific information about them....

_____	\$ _____
-------	----------

**Money or property owed to you**

**Current value of the portion you own?**  
**Do not deduct secured claims or exemptions.**

**28. Tax refunds owed to you** No Yes. Give specific information about them, including whether you already filed the returns and the tax years. ....

_____
-------

Federal: \$ \_\_\_\_\_  
 State: \$ \_\_\_\_\_  
 Local: \$ \_\_\_\_\_

**29. Family support**

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

 No Yes. Give specific information.....

_____
-------

Alimony: \$ \_\_\_\_\_  
 Maintenance: \$ \_\_\_\_\_  
 Support: \$ \_\_\_\_\_  
 Divorce settlement: \$ \_\_\_\_\_  
 Property settlement: \$ \_\_\_\_\_

**30. Other amounts someone owes you**

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

 No Yes. Give specific information.....

_____	\$ _____
-------	----------

Debtor 1

Charise Laron Harrell

First Name

Middle Name

Last Name

Case number (*if known*)

1-18-41756-nhl

**31. Interests in insurance policies**

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

 No Yes. Name the insurance company of each policy and list its value. ....

Company name:

Beneficiary:

Surrender or refund value:

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

 No Yes. Give specific information.....

\$ \_\_\_\_\_

**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

Examples: Accidents, employment disputes, insurance claims, or rights to sue

 No Yes. Describe each claim. ....

Byron Harrell - Mortgage loan

\$ 182,578

**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims** No Yes. Describe each claim. ....

\$ \_\_\_\_\_

**35. Any financial assets you did not already list** No Yes. Give specific information.....

\$ \_\_\_\_\_

**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here** →

\$ 182,578

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.****37. Do you own or have any legal or equitable interest in any business-related property?** No. Go to Part 6. Yes. Go to line 38.

Current value of the portion you own?

Do not deduct secured claims or exemptions.

**38. Accounts receivable or commissions you already earned** No Yes. Describe.....

\$ \_\_\_\_\_

**39. Office equipment, furnishings, and supplies**

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

 No Yes. Describe.....

\$ \_\_\_\_\_

Debtor 1

Charise Lavon Harrell

First Name Middle Name Last Name

Case number (if known)

1-18-41756-nhl

## 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

 No Yes. Describe.....

	\$ _____
--	----------

## 41. Inventory

 No Yes. Describe.....

	\$ _____
--	----------

## 42. Interests in partnerships or joint ventures

 No Yes. Describe..... Name of entity:

% of ownership:

	% _____		\$ _____
	% _____		\$ _____
	% _____		\$ _____

## 43. Customer lists, mailing lists, or other compilations

 No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes. Describe.....

	\$ _____
--	----------

## 44. Any business-related property you did not already list

 No Yes. Give specific information .....

	\$ _____
	\$ _____
	\$ _____
	\$ _____
	\$ _____
	\$ _____

## 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here.



	\$ _____
--	----------

**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**  
If you own or have an interest in farmland, list it in Part 1.

## 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- No. Go to Part 7.  
 Yes. Go to line 47.

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

## 47. Farm animals

Examples: Livestock, poultry, farm-raised fish

- No  
 Yes.....

	\$ _____
--	----------

Debtor 1 Charise Lavon Harrell

First Name

Middle Name

Last Name

Case number (if known) 1-18-41756**48. Crops—either growing or harvested** No Yes. Give specific information.....

\$ \_\_\_\_\_

**49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade** No Yes .....

\$ \_\_\_\_\_

**50. Farm and fishing supplies, chemicals, and feed** No Yes .....

\$ \_\_\_\_\_

**51. Any farm- and commercial fishing-related property you did not already list** No Yes. Give specific information.....

\$ \_\_\_\_\_

**52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here** → \$ \_\_\_\_\_**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above****53. Do you have other property of any kind you did not already list?**

Examples: Season tickets, country club membership

 No Yes. Give specific information.....

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

**54. Add the dollar value of all of your entries from Part 7. Write that number here** → \$ \_\_\_\_\_**Part 8: List the Totals of Each Part of this Form**55. Part 1: Total real estate, line 2 ..... → \$ 282-00056. Part 2: Total vehicles, line 5 \$ 282.000 ch

57. Part 3: Total personal and household items, line 15 \$ \_\_\_\_\_

58. Part 4: Total financial assets, line 36 \$ \_\_\_\_\_

59. Part 5: Total business-related property, line 45 \$ \_\_\_\_\_

60. Part 6: Total farm- and fishing-related property, line 52 \$ \_\_\_\_\_

61. Part 7: Total other property not listed, line 54 + \$ \_\_\_\_\_

62. Total personal property. Add lines 56 through 61. \$ \_\_\_\_\_ Copy personal property total → + \$ \_\_\_\_\_

63. Total of all property on Schedule A/B. Add line 55 + line 62. \$ 282-000

**Fill in this information to identify your case:**

Debtor 1	<u>Charise</u>	<u>Luvon</u>	<u>Harrell</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>East</u>	District of	<u>New York</u>
Case number (if known)	<u>1-18-41756-nhl</u>		

Check if this is an amended filing

**Official Form 106C****Schedule C: The Property You Claim as Exempt**

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

**Part 1: Identify the Property You Claim as Exempt****1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.**

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

**2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
Brief description: Line from Schedule A/B: <u>I family</u>	\$ <u>282,000</u>	<input checked="" type="checkbox"/> \$ <u>282,000</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

**3. Are you claiming a homestead exemption of more than \$160,375?**

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

- No  
 Yes

Debtor 1

Charise Lavon Harrell

First Name

Middle Name

Last Name

Case number (if known)

1-18-41756-nhl

**Part 2: Additional Page****Brief description of the property and line on Schedule A/B that lists this property****Current value of the portion you own****Amount of the exemption you claim****Specific laws that allow exemption**

Copy the value from Schedule A/B

Check only one box for each exemption

Brief description:

\$ \_\_\_\_\_

 \$ \_\_\_\_\_ 100% of fair market value, up to any applicable statutory limit

Line from Schedule A/B:

\_\_\_\_\_

Brief description:

\$ \_\_\_\_\_

 \$ \_\_\_\_\_ 100% of fair market value, up to any applicable statutory limit

Line from Schedule A/B:

\_\_\_\_\_

Brief description:

\$ \_\_\_\_\_

 \$ \_\_\_\_\_ 100% of fair market value, up to any applicable statutory limit

Line from Schedule A/B:

\_\_\_\_\_

Brief description:

\$ \_\_\_\_\_

 \$ \_\_\_\_\_ 100% of fair market value, up to any applicable statutory limit

Line from Schedule A/B:

\_\_\_\_\_

Brief description:

\$ \_\_\_\_\_

 \$ \_\_\_\_\_ 100% of fair market value, up to any applicable statutory limit

Line from Schedule A/B:

\_\_\_\_\_

Brief description:

\$ \_\_\_\_\_

 \$ \_\_\_\_\_ 100% of fair market value, up to any applicable statutory limit

Line from Schedule A/B:

\_\_\_\_\_

Brief description:

\$ \_\_\_\_\_

 \$ \_\_\_\_\_ 100% of fair market value, up to any applicable statutory limit

Line from Schedule A/B:

\_\_\_\_\_

Brief description:

\$ \_\_\_\_\_

 \$ \_\_\_\_\_ 100% of fair market value, up to any applicable statutory limit

Line from Schedule A/B:

\_\_\_\_\_

Brief description:

\$ \_\_\_\_\_

 \$ \_\_\_\_\_ 100% of fair market value, up to any applicable statutory limit

Line from Schedule A/B:

\_\_\_\_\_

Brief description:

\$ \_\_\_\_\_

 \$ \_\_\_\_\_ 100% of fair market value, up to any applicable statutory limit

Fill in this information to identify your case:

Debtor 1 First Name	Charise	Middle Name	Last Name
Debtor 2 (Spouse, if filing) First Name		Middle Name	Last Name
United States Bankruptcy Court for the: <u>East</u> District of <u>New York</u>			
Case number (if known)	<u>1-18-41756-nhl</u>		

Check if this is an amended filing

## Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below.

**Part 1: List All Secured Claims**

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion if any
\$ 182,578	\$ _____	\$ _____

2.1 Creditor's Name: Shelldpoint Mortgage SVS

Describe the property that secures the claim:

\$ 182,578

\$ \_\_\_\_\_

\$ \_\_\_\_\_

Number Street: P.O. Box 10826

I Family

City State ZIP Code: Greenville, SC 29603-0826

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

Who owes the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim relates to a community debt

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)  
 Statutory lien (such as tax lien, mechanic's lien)  
 Judgment lien from a lawsuit  
 Other (including a right to offset) inheritance

Date debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Describe the property that secures the claim: \$ \_\_\_\_\_

Creditor's Name: \_\_\_\_\_

Number Street: \_\_\_\_\_

City State ZIP Code: \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

Who owes the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim relates to a community debt

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)  
 Statutory lien (such as tax lien, mechanic's lien)  
 Judgment lien from a lawsuit  
 Other (including a right to offset) \_\_\_\_\_

Date debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Add the dollar value of your entries in Column A on this page. Write that number here: \$ \_\_\_\_\_

Debtor 1

Charise Laron Harrell

Case number (if known)

1-18-41756-hhl

**Additional Page****Part 1:**

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion if any
---	--	--

Describe the property that secures the claim: \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

Creditor's Name

Number Street

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset) \_\_\_\_\_

Date debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Creditor's Name

Number Street

City State ZIP Code

Describe the property that secures the claim: \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset) \_\_\_\_\_

Date debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Creditor's Name

Number Street

City State ZIP Code

Describe the property that secures the claim: \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset) \_\_\_\_\_

Date debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Add the dollar value of your entries in Column A on this page. Write that number here: \$ \_\_\_\_\_

If this is the last page of your form, add the dollar value totals from all pages.  
Write that number here: \$ \_\_\_\_\_

Debtor 1

Charise Laron Harrell

Case number (if known)

1-18-41756-nhl

**Part 2: List Others to Be Notified for a Debt That You Already Listed**

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Name \_\_\_\_\_

Number Street \_\_\_\_\_

City State ZIP Code \_\_\_\_\_

Name \_\_\_\_\_

Number Street \_\_\_\_\_

City State ZIP Code \_\_\_\_\_

Name \_\_\_\_\_

Number Street \_\_\_\_\_

City State ZIP Code \_\_\_\_\_

Name \_\_\_\_\_

Number Street \_\_\_\_\_

City State ZIP Code \_\_\_\_\_

Name \_\_\_\_\_

Number Street \_\_\_\_\_

City State ZIP Code \_\_\_\_\_

Name \_\_\_\_\_

Number Street \_\_\_\_\_

City State ZIP Code \_\_\_\_\_

On which line in Part 1 did you enter the creditor? \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

On which line in Part 1 did you enter the creditor? \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

On which line in Part 1 did you enter the creditor? \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

On which line in Part 1 did you enter the creditor? \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

On which line in Part 1 did you enter the creditor? \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

On which line in Part 1 did you enter the creditor? \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

**Fill in this information to identify your case:**

Debtor 1	<u>Charise Laron Harrell</u>	
	First Name	Middle Name
Debtor 2		
(Spouse, if filing)	First Name	Middle Name
United States Bankruptcy Court for the:	East	District of New York
Case number (if known)	<u>1-18-41756-nhl</u>	

Check if this is an amended filing

## Official Form 106E/F

### Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- No, Go to Part 2.  
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total claim	Priority amount	Nonpriority amount
-------------	-----------------	--------------------

2.1

Shellpoint Mortgage SVS  
Priority Creditor's Name  
P.O. Box 10826  
Number Street

Last 4 digits of account number 1507 \$ 182,578 <sup>b</sup> 142 \$ 081.15

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

Type of PRIORITY unsecured claim:

- Domestic support obligations  
 Taxes and certain other debts you owe the government  
 Claims for death or personal injury while you were intoxicated  
 Other. Specify Mortgage loan

2.2

Priority Creditor's Name  
\_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

Type of PRIORITY unsecured claim:

- Domestic support obligations  
 Taxes and certain other debts you owe the government  
 Claims for death or personal injury while you were intoxicated  
 Other. Specify \_\_\_\_\_

Debtor 1

Charise Lavon Harrell

First Name

Middle Name

Last Name

Case number (if known)

1-18-41756-nhl

**Part 1: Your PRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Total claim	Priority amount	Nonpriority amount
-------------	-----------------	--------------------

Priority Creditor's Name

Number Street

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

Type of PRIORITY unsecured claim:

- Domestic support obligations  
 Taxes and certain other debts you owe the government  
 Claims for death or personal injury while you were intoxicated  
 Other. Specify \_\_\_\_\_

Priority Creditor's Name

Number Street

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

Type of PRIORITY unsecured claim:

- Domestic support obligations  
 Taxes and certain other debts you owe the government  
 Claims for death or personal injury while you were intoxicated  
 Other. Specify \_\_\_\_\_

Priority Creditor's Name

Number Street

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

Type of PRIORITY unsecured claim:

- Domestic support obligations  
 Taxes and certain other debts you owe the government  
 Claims for death or personal injury while you were intoxicated  
 Other. Specify \_\_\_\_\_

Debtor 1 Charisse Lavon Harrell

First Name

Middle Name

Last Name

Case number (if known) 1-18-41756-nhl**Part 2: List All of Your NONPRIORITY Unsecured Claims****3. Do any creditors have nonpriority unsecured claims against you?**

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.**

4.1

Total claim

Nonpriority Creditor's Name

Last 4 digits of account number \_\_\_\_\_

\$ \_\_\_\_\_

Number Street

When was the debt incurred? \_\_\_\_\_

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

4.2

Nonpriority Creditor's Name

Last 4 digits of account number \_\_\_\_\_

\$ \_\_\_\_\_

Number Street

When was the debt incurred? \_\_\_\_\_

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

4.3

Nonpriority Creditor's Name

Last 4 digits of account number \_\_\_\_\_

\$ \_\_\_\_\_

Number Street

When was the debt incurred? \_\_\_\_\_

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

Debtor 1

Charise Laron Harrell

Case number (if known)

1:18-41756-nhl

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim \_\_\_\_\_

Nonpriority Creditor's Name \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

\$ \_\_\_\_\_

Number Street \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

Type of **NONPRIORITY** unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

Nonpriority Creditor's Name \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

\$ \_\_\_\_\_

Number Street \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

Type of **NONPRIORITY** unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

Nonpriority Creditor's Name \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

\$ \_\_\_\_\_

Number Street \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No  
 Yes

Type of **NONPRIORITY** unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

Debtor 1

Charise Laron Harrell

First Name

Middle Name

Last Name

Case number (if known)

1-18-41756-hh1

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name \_\_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Number Street \_\_\_\_\_

Line \_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

City State ZIP Code \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Name \_\_\_\_\_

Line \_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Number Street \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Name \_\_\_\_\_

Line \_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Number Street \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Name \_\_\_\_\_

Line \_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Number Street \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Name \_\_\_\_\_

Line \_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Number Street \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Name \_\_\_\_\_

Line \_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Number Street \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Name \_\_\_\_\_

Line \_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Number Street \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Debtor 1

Charisse Lavon Harrell

First Name

Middle Name

Last Name

Case number (if known)

1-18-41756-nhl**Part 4:****Add the Amounts for Each Type of Unsecured Claim**

- 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159.**  
**Add the amounts for each type of unsecured claim.**

**Total claims from Part 1**

- 6a. Domestic support obligations  
 6b. Taxes and certain other debts you owe the government  
 6c. Claims for death or personal injury while you were intoxicated  
 6d. Other. Add all other priority unsecured claims.  
 Write that amount here.
- 6e. Total. Add lines 6a through 6d.

6a. \$ \_\_\_\_\_

6b. \$ 14,424.28

6c. \$ \_\_\_\_\_

6d. + \$ 12,657.10**Total claim**  
\$ 27,081.38**Total claims from Part 2**

- 6f. Student loans  
 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 6h. Debts to pension or profit-sharing plans, and other similar debts  
 6i. Other. Add all other nonpriority unsecured claims.  
 Write that amount here.
- 6j. Total. Add lines 6f through 6i.

6f. \$ 7,432

6g. \$ \_\_\_\_\_

6h. \$ \_\_\_\_\_

6i. + \$ \_\_\_\_\_

**Total claim**  
\$ 34,513.38

B 6G (Official Form 6G) (12/07)

In re Charise Lavon Harrell  
DebtorCase No. 1-18-41756-nhl  
(if known)**SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES**

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

B 6H (Official Form 6H) (12/07)

In re Charise Laron Harrell  
DebtorCase No. 1-18-41756-nhl  
(if known)**SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

**Fill in this information to identify your case:**

Debtor 1 First Name	<u>Charise Laron Harrell</u>	
Middle Name		
Last Name		
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>East</u> District of <u>New York</u>		
Case number (if known)	<u>1-18-41756-nhl</u>	

Check if this is:

- An amended filing  
 A supplement showing postpetition chapter 13 income as of the following date:  
3 30 2018  
 MM / DD / YYYY

Official Form 106I

## Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

### Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Debtor 1

- Employed  
 Not employed

Debtor 2 or non-filing spouse

- Employed  
 Not employed

Occupation

Disabled

Employer's name

\_\_\_\_\_

Employer's address

Number Street  
 \_\_\_\_\_  
 \_\_\_\_\_

City State ZIP Code      City State ZIP Code

How long employed there?

\_\_\_\_\_

### Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or  
non-filing spouse

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 162 - \$ \_\_\_\_\_

3. Estimate and list monthly overtime pay.

3. + \$ \_\_\_\_\_ + \$ \_\_\_\_\_

4. Calculate gross income. Add line 2 + line 3.

4. \$ \_\_\_\_\_ \$ \_\_\_\_\_

Debtor 1 Charise Lavon Harrell  
 First Name Middle Name Last Name

Case number (if known) 1-18-41756-nhl

Copy line 4 here.....	→ 4.	For Debtor 1	For Debtor 2 or non-filing spouse
		\$ _____	\$ _____
<b>5. List all payroll deductions:</b>			
5a. Tax, Medicare, and Social Security deductions	5a. \$ _____	\$ _____	
5b. Mandatory contributions for retirement plans	5b. \$ _____	\$ _____	
5c. Voluntary contributions for retirement plans	5c. \$ _____	\$ _____	
5d. Required repayments of retirement fund loans	5d. \$ _____	\$ _____	
5e. Insurance	5e. \$ _____	\$ _____	
5f. Domestic support obligations	5f. \$ _____	\$ _____	
5g. Union dues	5g. \$ _____	\$ _____	
5h. Other deductions. Specify: _____	5h. + \$ _____	+ \$ _____	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. \$ _____	\$ _____	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ _____	\$ _____	
<b>8. List all other income regularly received:</b>			
8a. Net income from rental property and from operating a business, profession, or farm			
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ _____	\$ _____	
8b. Interest and dividends	8b. \$ _____	\$ _____	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive			
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ _____	\$ _____	
8d. Unemployment compensation	8d. \$ _____	\$ _____	
8e. Social Security	8e. \$ _____	\$ _____	
8f. Other government assistance that you regularly receive			
Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	8f. \$ 356	\$ _____	
Specify: <u>S.N.A.P.</u>	8g. \$ _____	\$ _____	
8h. Other monthly income. Specify: _____	8h. + \$ _____	+ \$ _____	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. \$ _____	\$ _____	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 356	+ \$ _____	= \$ _____
11. State all other regular contributions to the expenses that you list in <i>Schedule J</i> .  Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.			
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> .			
Specify: _____	11. + \$ _____		
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies.	12. \$ _____		
13. Do you expect an increase or decrease within the year after you file this form?			
<input checked="" type="checkbox"/> No.			
<input type="checkbox"/> Yes. Explain: _____			

Fill in this information to identify your case:

Debtor 1 <b>Charisse Lavon Harrell</b>	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>East</b>	District of <b>New York</b>		
Case number (If known)	<b>1-18-41756-nh1</b>		

Check if this is:

- An amended filing  
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

## Official Form 106J

### Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

1. Is this a joint case?

- No. Go to line 2.  
 Yes. Does Debtor 2 live in a separate household?

No

Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents?

No

Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

- No  
 Yes  
 No  
 Yes  
 No  
 Yes  
 No  
 Yes  
 No  
 Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

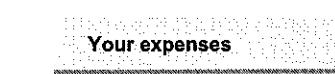
- No  
 Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.



4. \$ 0

If not included in line 4:

- 4a. Real estate taxes  
 4b. Property, homeowner's, or renter's insurance  
 4c. Home maintenance, repair, and upkeep expenses  
 4d. Homeowner's association or condominium dues

4a. \$ \_\_\_\_\_  
 4b. \$ \_\_\_\_\_  
 4c. \$ \_\_\_\_\_  
 4d. \$ \_\_\_\_\_

Debtor 1

Charise Laron Harrell

First Name Middle Name Last Name

Case number (if known)

1-18-41756-nhl

**5. Additional mortgage payments for your residence, such as home equity loans**5. \$ 0**6. Utilities:**

6a. Electricity, heat, natural gas

6a. \$ 81 131.00

6b. Water, sewer, garbage collection

6b. \$ 0

6c. Telephone, cell phone, Internet, satellite, and cable services

6c. \$ 34 30.00

6d. Other. Specify: \_\_\_\_\_

6d. \$ 0**7. Food and housekeeping supplies**7. \$ 0**8. Childcare and children's education costs**8. \$ 0**9. Clothing, laundry, and dry cleaning**9. \$ 10.00**10. Personal care products and services**10. \$ 0**11. Medical and dental expenses**11. \$ 20.00**12. Transportation. Include gas, maintenance, bus or train fare.**12. \$ 0

Do not include car payments.

**13. Entertainment, clubs, recreation, newspapers, magazines, and books**13. \$ 0**14. Charitable contributions and religious donations**14. \$ 0**15. Insurance.**

Do not include insurance deducted from your pay or included in lines 4 or 20.

15a. \$ 0

15b. Life insurance

15b. \$ 0

15c. Health insurance

15c. \$ 0

15d. Vehicle insurance

15d. \$ 0

15e. Other insurance. Specify: \_\_\_\_\_

**16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.**16. \$ 0

Specify: \_\_\_\_\_

**17. Installment or lease payments:**17a. \$ 0

17a. Car payments for Vehicle 1

17b. \$ 0

17b. Car payments for Vehicle 2

17c. \$ 0

17c. Other. Specify: \_\_\_\_\_

17d. \$ 0

17d. Other. Specify: \_\_\_\_\_

**18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).**18. \$ 0**19. Other payments you make to support others who do not live with you.**19. \$ 0

Specify: \_\_\_\_\_

**20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.**20a. \$ 0

20a. Mortgages on other property

20b. \$ 0

20b. Real estate taxes

20c. \$ 0

20c. Property, homeowner's, or renter's insurance

20d. \$ 0

20d. Maintenance, repair, and upkeep expenses

20e. \$ 0

20e. Homeowner's association or condominium dues

Debtor 1

Charise Laron Harrell

First Name

Middle Name

Last Name

Case number (if known)

1-18-41756-nhl

21. Other. Specify: \_\_\_\_\_

21. +\$ \_\_\_\_\_

## 22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22c. Add line 22a and 22b. The result is your monthly expenses.

22a.	\$ <u>291.00</u>
22b.	\$ _____
22c.	\$ _____

## 23. Calculate your monthly net income.

23a. Copy line 12 (*your combined monthly income*) from Schedule I.

23b. Copy your monthly expenses from line 22c above.

23c. Subtract your monthly expenses from your monthly income.

The result is your *monthly net income*.

23a.	\$ <u>291.00</u>
23b.	- \$ <u>362.00</u>
23c.	\$ <u>73.00</u>

## 24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

 No. Yes.

Explain here:

Fill in this information to identify your case:

Debtor 1 First Name	Chanise	Middle Name	LaVon	Last Name	Harnell
Debtor 2 (Spouse, if filing) First Name		Middle Name		Last Name	
United States Bankruptcy Court for the: Case number (If known)	East	District of NY	1-18-41756-nhl		

Check if this is:

- An amended filing
- A supplement showing post-petition chapter 13 expenses as of the following date:  
03 30 2018  
MM / DD / YYYY
- A separate filing for Debtor 2 because Debtor 2 maintains a separate household

## Official Form B 6J

### Schedule J: Your Expenses

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

1. Is this a joint case?

- No. Go to line 2.
- Yes. Does Debtor 2 live in a separate household?

- No
- Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

No

Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

- No
- Yes

Do not state the dependents' names.

_____	_____
_____	_____
_____	_____
_____	_____

3. Do your expenses include expenses of people other than yourself and your dependents?

No

Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 6I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

If not included in line 4:

- 4a. Real estate taxes
- 4b. Property, homeowner's, or renter's insurance
- 4c. Home maintenance, repair, and upkeep expenses
- 4d. Homeowner's association or condominium dues

4. \$ 233.00



- 4a. \$ \_\_\_\_\_
- 4b. \$ \_\_\_\_\_
- 4c. \$ \_\_\_\_\_
- 4d. \$ \_\_\_\_\_

Debtor 1

Charise Laron Harrell

First Name Middle Name Last Name

Case number (if known)

1-18-41756-nhl

5. Additional mortgage payments for your residence, such as home equity loans
6. Utilities:
- 6a. Electricity, heat, natural gas
  - 6b. Water, sewer, garbage collection
  - 6c. Telephone, cell phone, Internet, satellite, and cable services
  - 6d. Other. Specify: \_\_\_\_\_
7. Food and housekeeping supplies
8. Childcare and children's education costs
9. Clothing, laundry, and dry cleaning
10. Personal care products and services
11. Medical and dental expenses
12. Transportation. Include gas, maintenance, bus or train fare.  
Do not include car payments.
13. Entertainment, clubs, recreation, newspapers, magazines, and books
14. Charitable contributions and religious donations
15. Insurance.  
Do not include insurance deducted from your pay or included in lines 4 or 20.
- 15a. Life insurance
  - 15b. Health insurance
  - 15c. Vehicle insurance
  - 15d. Other insurance. Specify: \_\_\_\_\_
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  
Specify: \_\_\_\_\_
17. Installment or lease payments:
- 17a. Car payments for Vehicle 1
  - 17b. Car payments for Vehicle 2
  - 17c. Other. Specify: \_\_\_\_\_
  - 17d. Other. Specify: \_\_\_\_\_
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form B 6l).
19. Other payments you make to support others who do not live with you.  
Specify: \_\_\_\_\_
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.
- 20a. Mortgages on other property
  - 20b. Real estate taxes
  - 20c. Property, homeowner's, or renter's insurance
  - 20d. Maintenance, repair, and upkeep expenses
  - 20e. Homeowner's association or condominium dues

Your expenses	
5.	\$ _____
6a.	\$ 131.00
6b.	\$ _____
6c.	\$ 30.00
6d.	\$ _____
7.	\$ _____
8.	\$ _____
9.	\$ 10.00
10.	\$ 10.00
11.	\$ _____
12.	\$ 20.00
13.	\$ 0
14.	\$ 0
15a.	\$ 88
15b.	\$ 0
15c.	\$ 0
15d.	\$ 0
16.	\$ 0
17a.	\$ 0
17b.	\$ 0
17c.	\$ 0
17d.	\$ 0
18.	\$ 0
19.	\$ 0
20a.	\$ 0
20b.	\$ 0
20c.	\$ 0
20d.	\$ 0
20e.	\$ 0

Debtor 1

Charise Lavon Harrell

First Name

Middle Name

Last Name

Case number (if known)

1-18-41756-nhl

21. Other. Specify: \_\_\_\_\_

21. +\$ \_\_\_\_\_

22. Your monthly expenses. Add lines 4 through 21.

The result is your monthly expenses.

22. \$ 301.00

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23a. \$ 301.00

23b. Copy your monthly expenses from line 22 above.

23b. -\$ 362.00

23c. Subtract your monthly expenses from your monthly income.

23c. \$ 43.00

The result is your monthly net income.

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

 No. Yes.

Explain here:

**Fill in this information to identify your case:**

Debtor 1 First Name	Charise	Lavon	Harrell
Middle Name			
Last Name			
Debtor 2 (Spouse, if filing) First Name		Middle Name	Last Name
United States Bankruptcy Court for the: <u>East</u> District of <u>New York</u>			
Case number (If known)	<u>1-18-41756-nhl</u>		

Check if this is an amended filing

## Official Form 106Dec

**Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**Sign Below**

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person \_\_\_\_\_ . Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

x Charise Harrell x

Signature of Debtor 1

Date 4/19/2018  
MM / DD / YYYY

Signature of Debtor 2

Date \_\_\_\_\_  
MM / DD / YYYY

**Fill in this information to identify your case:**

Debtor 1 <small>First Name</small>	<u>Charise</u>	<u>Lavon</u>	<u>Harrell</u>
Middle Name			
Debtor 2 <small>(Spouse, if filing) First Name</small>	<u></u>	<small>Middle Name</small>	<small>Last Name</small>
United States Bankruptcy Court for the: <u>East</u>	District of <u>New York</u>		
Case number <small>(if known)</small>	<u>1-18-41756-nhl</u>		

Check if this is an amended filing

**Official Form 107****Statement of Financial Affairs for Individuals Filing for Bankruptcy**

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Give Details About Your Marital Status and Where You Lived Before****1. What is your current marital status?**

- Married  
 Not married

**2. During the last 3 years, have you lived anywhere other than where you live now?**

No

Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

**Debtor 1:**

**Dates Debtor 1**

lived there

**Dates Debtor 2**

lived there

Same as Debtor 1

Same as Debtor 1

Number Street  


---



---



---

From \_\_\_\_\_  
To \_\_\_\_\_

Number Street  


---



---



---

From \_\_\_\_\_  
To \_\_\_\_\_

City State ZIP Code

City State ZIP Code

Same as Debtor 1

Same as Debtor 1

Number Street  


---



---



---

From \_\_\_\_\_  
To \_\_\_\_\_

Number Street  


---



---



---

From \_\_\_\_\_  
To \_\_\_\_\_

City State ZIP Code

City State ZIP Code

**3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)**

- No  
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

**Part 2: Explain the Sources of Your Income**

Debtor 1

Chanise Lavon Harrell

First Name

Middle Name

Last Name

Case number (if known)

1-18-41756-nhl

**4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- No  
 Yes. Fill in the details.

Debtor 1	Debtor 2
<b>Sources of income</b> Check all that apply.	<b>Sources of income</b> Check all that apply.
<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
<b>From January 1 of current year until the date you filed for bankruptcy:</b>  (January 1 to December 31, <u>2017</u> ) YYYY	<b>Gross income (before deductions and exclusions)</b> \$ <u>162 00</u>
<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
<b>For last calendar year:</b>  (January 1 to December 31, <u>2017</u> ) YYYY	<b>Gross income (before deductions and exclusions)</b> \$ <u>72 00</u>
<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
<b>For the calendar year before that:</b>  (January 1 to December 31, <u>2016</u> ) YYYY	<b>Gross income (before deductions and exclusions)</b> \$ _____
<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business

**5. Did you receive any other income during this year or the two previous calendar years?**Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- No  
 Yes. Fill in the details.

Debtor 1	Debtor 2
<b>Sources of income</b> Describe below.	<b>Sources of income</b> Describe below.
<b>Gross income from each source</b> (before deductions and exclusions)	<b>Gross income from each source</b> (before deductions and exclusions)
<b>From January 1 of current year until the date you filed for bankruptcy:</b>  (January 1 to December 31, <u>2017</u> ) YYYY	<u>162.00</u> <u>72.00</u> \$ <u>174 00</u> <u>72.00</u> \$ _____ \$ _____
<b>For last calendar year:</b>  (January 1 to December 31, <u>2017</u> ) YYYY	\$ _____ \$ _____ \$ _____ \$ _____
<b>For the calendar year before that:</b>  (January 1 to December 31, <u>2016</u> ) YYYY	\$ _____ \$ _____ \$ _____ \$ _____

Debtor 1

Charise Lavon Harrell

First Name Middle Name Last Name

Case number (if known)

1-18-41756-nhl

**Part 3: List Certain Payments You Made Before You Filed for Bankruptcy****6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more?

- No. Go to line 7.

- Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

- Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- No. Go to line 7.

- Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name	Number Street	City State ZIP Code	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
_____	_____	_____	_____	\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
_____	_____	_____	_____	\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
_____	_____	_____	_____	\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
_____	_____	_____	_____	\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____

Debtor 1

Charise Lavon Harrell

Case number (if known)

1-18-41756-nhl

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

 No Yes. List all payments to an insider.

Insider's Name	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Number Street		\$	\$	
City State ZIP Code		\$	\$	
Insider's Name				
Number Street				
City State ZIP Code				

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

 No Yes. List all payments that benefited an insider.

Insider's Name	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Number Street		\$	\$	
City State ZIP Code		\$	\$	
Insider's Name				
Number Street				
City State ZIP Code				

Debtor 1

Charise Lavon Harrell

First Name Middle Name Last Name

Case number (if known)

1-18-41756-nhl

**Part 4: Identify Legal Actions, Repossessions, and Foreclosures****9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

 No Yes. Fill in the details.

Nature of the case	Court or agency	Status of the case
Case title <u>O.A.T. H.</u>  Case number <u>040566543H</u>	Court Name <u>OATH Trials &amp; Hearings</u> Number <u>350 ST Marks PL</u> City <u>S-I</u> , State <u>NY</u> ZIP Code <u>10301</u>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
Case title <u>NYC Dept of Finance</u>  Case number <u>17175838S</u>	Court Name <u>NYC Dept of Finance</u> Number <u>59 Maiden Lane 19<sup>th</sup> FL</u> City <u>NY</u> , State <u>NY</u> ZIP Code <u>10038-4502</u>	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

**10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**

Check all that apply and fill in the details below.

 No. Go to line 11. Yes. Fill in the information below.

Describe the property	Date	Value of the property
<input type="text"/> Creditor's Name	<input type="text"/>	\$ <input type="text"/>
<input type="text"/> Number Street	<input type="text"/>	
<input type="text"/> City <input type="text"/> State <input type="text"/> ZIP Code	<input type="text"/>	
<b>Explain what happened</b>		
<input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.		
<b>Describe the property</b>		
<input type="text"/> Creditor's Name	<input type="text"/>	\$ <input type="text"/>
<input type="text"/> Number Street	<input type="text"/>	
<input type="text"/> City <input type="text"/> State <input type="text"/> ZIP Code	<input type="text"/>	
<b>Explain what happened</b>		
<input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.		

Debtor 1

Charisse LaVon Harrell

First Name Middle Name Last Name

Case number (if known)

1-18-41756-nhl

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

 No Yes. Fill in the details.

Describe the action the creditor took		Date action was taken	Amount
Creditor's Name			\$ _____
Number Street			\$ _____
City	State ZIP Code	Last 4 digits of account number: XXXX-	_____

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

 No Yes

#### Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

 No Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift			\$ _____
Number Street			\$ _____
City State ZIP Code			
Person's relationship to you			

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift			\$ _____
Number Street			\$ _____
City State ZIP Code			
Person's relationship to you			

Debtor 1

Charise Laron Harrell

First Name

Middle Name

Last Name

Case number (if known)

1-18-41756-nhl

**14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?** No Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
Charity's Name			\$ _____
Number Street			\$ _____
City State ZIP Code			

**Part 6: List Certain Losses****15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?** No Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss <small>Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.</small>	Date of your loss	Value of property lost
			\$ _____

**Part 7: List Certain Payments or Transfers****16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?**

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

 No Yes. Fill in the details.

Person Who Was Paid	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Number Street			\$ _____
City State ZIP Code			\$ _____
Email or website address			
Person Who Made the Payment, if Not You			

Debtor 1

Charisse Laron Harrell

First Name Middle Name Last Name

Case number (if known)

1-18-41756-nhl

Description and value of any property transferred			Date payment or transfer was made	Amount of payment
Person Who Was Paid				\$ _____
Number Street				\$ _____
City	State	ZIP Code		
Email or website address				
Person Who Made the Payment, If Not You				

**17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?**

Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

Description and value of any property transferred			Date payment or transfer was made	Amount of payment
Person Who Was Paid				\$ _____
Number Street				\$ _____
City	State	ZIP Code		

**18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?**

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).

Do not include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person Who Received Transfer		
Number Street		
City	State	ZIP Code
Person's relationship to you		
Person Who Received Transfer		
Number Street		
City	State	ZIP Code
Person's relationship to you		

Debtor 1

Charisse Lavon Harrell

First Name

Middle Name

Last Name

Case number (if known)

1-18-41756-nhl

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

 No Yes. Fill in the details.**Description and value of the property transferred****Date transfer was made**

Name of trust \_\_\_\_\_

**Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units**

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

 No Yes. Fill in the details.**Last 4 digits of account number****Type of account or instrument****Date account was closed, sold, moved, or transferred****Last balance before closing or transfer**

Bank of America  
Name of Financial Institution  
D.O. Box 25118  
Number Street  
P.O. Box 15284  
Wilmington DE 19850  
City State ZIP Code

xxxx-9468 Checking Savings Money market Brokerage Other \_\_\_\_\_10/17\$ 0.94

Bank of America  
Name of Financial Institution  
P.O. Box 15284  
Number Street  
Wilmington DE 19850  
City State ZIP Code

xxxx-0935 Checking Savings Money market Brokerage Other \_\_\_\_\_10/17\$ -2.99

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

 No Yes. Fill in the details.**Who else had access to it?****Describe the contents****Do you still have it?**

Name of Financial Institution \_\_\_\_\_  
Number Street \_\_\_\_\_  
\_\_\_\_\_  
City State ZIP Code \_\_\_\_\_

Name \_\_\_\_\_  
Number Street \_\_\_\_\_  
\_\_\_\_\_  
City State ZIP Code \_\_\_\_\_

No  
 Yes

Debtor 1 Charise Lavon Harrell

First Name Middle Name Last Name

Case number (if known)

1-18-41756-nhl

## 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

 No Yes. Fill in the details.

Who else has or had access to it?	Describe the contents	Do you still have it?
Name of Storage Facility	Name	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Number Street	Number Street	
City State ZIP Code		
City	State	ZIP Code

## Part 9: Identify Property You Hold or Control for Someone Else

## 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

 No Yes. Fill in the details.

Where is the property?	Describe the property	Value
Owner's Name		\$ _____
Number Street		
City State ZIP Code		

## Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

## 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

 No Yes. Fill in the details.

C. A. T. H.  
Name of site  
350 St Marks pl  
Number Street  
Main FL  
City S.I., NY 10301 State ZIP Code

Governmental unit	Environmental law, if you know it	Date of notice
<u>Governmental unit</u> <u>Hearings Division</u> Governmental unit	<u>Summons</u>	<u>9/20/17</u>
Number Street		
City State ZIP Code		

Debtor 1 Charise Lavon Harrell  
 First Name Middle Name Last Name

Case number (if known) 1-18-41756-nhl

25. Have you notified any governmental unit of any release of hazardous material?

- No  
 Yes. Fill in the details.

O-A-T-H-  
 Name of site  
350 ST Marks X1  
 Number Street

Hearings Unit  
 Governmental unit  
 Number Street

Environmental law, if you know it

Date of notice

9/20/03

S-I, NY, 10301  
 City State ZIP Code

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- No  
 Yes. Fill in the details.

NYS Dept of  
Finance  
17175838 S  
 Case number

Court or agency	Nature of the case	Status of the case
<u>NYS</u>	<u>Tax &amp; water</u>	<input checked="" type="checkbox"/> Pending
<u>59 Maiden Lane #19thFL</u>		<input type="checkbox"/> On appeal
<u>NY, NY 10038-4502</u>		<input type="checkbox"/> Concluded

**Part 11: Give Details About Your Business or Connections to Any Business**

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  
 A member of a limited liability company (LLC) or limited liability partnership (LLP)  
 A partner in a partnership  
 An officer, director, or managing executive of a corporation  
 An owner of at least 5% of the voting or equity securities of a corporation

No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

Business Name

Describe the nature of the business

Employer identification number

Do not include Social Security number or ITIN.

Number Street

EIN: \_\_\_\_\_

City State ZIP Code

Dates business existed

From \_\_\_\_\_ To \_\_\_\_\_

Business Name

Describe the nature of the business

Employer identification number

Do not include Social Security number or ITIN.

Number Street

Name of accountant or bookkeeper

EIN: \_\_\_\_\_

Dates business existed

City State ZIP Code

From \_\_\_\_\_ To \_\_\_\_\_

Debtor 1

Charisse Lavon Harrell

First Name Middle Name Last Name

Case number (if known)

1-18-41756-nhl

<b>Describe the nature of the business</b>			Employer identification number Do not include Social Security number or ITIN.
Business Name			EIN: _____
Number Street		Name of accountant or bookkeeper	Dates business existed
City _____ State _____ ZIP Code _____		From _____ To _____	

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

No

Yes. Fill in the details below.

Date issued \_\_\_\_\_

Name \_\_\_\_\_ MM / DD / YYYY \_\_\_\_\_

Number Street \_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

#### Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  
18 U.S.C. §§ 152, 1341, 1519, and 3571.

Charisse Harrell

Signature of Debtor 1

Date 4/19/2018

\_\_\_\_\_  
Signature of Debtor 2

Date \_\_\_\_\_

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

No  
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person \_\_\_\_\_

Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

**Fill in this information to identify your case:**

Debtor 1 Charise Laron Harrell  
 First Name Middle Name Last Name

Debtor 2  
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: East District of New York

Case number 1-18-41756-nhl  
 (if known)

**Check as directed in lines 17 and 21:**

According to the calculations required by this Statement:

- 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
- 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
- 3. The commitment period is 3 years.
- 4. The commitment period is 5 years.

Check if this is an amended filing

**Official Form 122C-1****Chapter 13 Statement of Your Current Monthly Income  
and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

**Part 1: Calculate Your Average Monthly Income****1. What is your marital and filing status? Check one only.**

Not married. Fill out Column A, lines 2-11.

Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

<b>Column A</b>	<b>Column B</b>
Debtor 1	Debtor 2 or non-filing spouse

**2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).**

\$ 362      \$ \_\_\_\_\_

**3. Alimony and maintenance payments. Do not include payments from a spouse.**

\$ \_\_\_\_\_      \$ \_\_\_\_\_

**4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.**

\$ \_\_\_\_\_      \$ \_\_\_\_\_

**5. Net income from operating a business, profession, or farm**

Debtor 1      Debtor 2

Gross receipts (before all deductions)      \$ \_\_\_\_\_      \$ \_\_\_\_\_

Ordinary and necessary operating expenses      - \$ \_\_\_\_\_ - \$ \_\_\_\_\_

Net monthly income from a business, profession, or farm      \$ \_\_\_\_\_      \$ \_\_\_\_\_      **Copy here →**      \$ \_\_\_\_\_      \$ \_\_\_\_\_

**6. Net income from rental and other real property**

Debtor 1      Debtor 2

Gross receipts (before all deductions)      \$ \_\_\_\_\_      \$ \_\_\_\_\_

Ordinary and necessary operating expenses      - \$ \_\_\_\_\_ - \$ \_\_\_\_\_

Net monthly income from rental or other real property      \$ \_\_\_\_\_      \$ \_\_\_\_\_      **Copy here →**      \$ \_\_\_\_\_      \$ \_\_\_\_\_

Debtor 1 Charise Lavon Harrell  
 First Name Middle Name Last Name

Case number (if known) 1-18-41756-nhl

**Column A**  
**Debtor 1**

**Column B**  
**Debtor 2 or  
 non-filing spouse**

**7. Interest, dividends, and royalties**

\$ \_\_\_\_\_ \$ \_\_\_\_\_

**8. Unemployment compensation**

\$ \_\_\_\_\_ \$ \_\_\_\_\_

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:        ↓

For you..... \$ \_\_\_\_\_  
 For your spouse ..... \$ \_\_\_\_\_

**9. Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act.

\$ \_\_\_\_\_ \$ \_\_\_\_\_

**10. Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.

S.n.A.P

\$ \_\_\_\_\_ \$ \_\_\_\_\_

\$ \_\_\_\_\_ \$ \_\_\_\_\_

Total amounts from separate pages, if any.

+ \$ \_\_\_\_\_ + \$ \_\_\_\_\_

**11. Calculate your total average monthly income.** Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

\$ \_\_\_\_\_ + \$ \_\_\_\_\_ =        **\$ 362**

Total average monthly income

**Part 2: Determine How to Measure Your Deductions from Income**

**12. Copy your total average monthly income from line 11.**        **\$ 362**

**13. Calculate the marital adjustment.** Check one:

You are not married. Fill in 0 below.

You are married and your spouse is filing with you. Fill in 0 below.

You are married and your spouse is not filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 below.

\_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_

\$ \_\_\_\_\_

+ \$ \_\_\_\_\_

\$ 0

Copy here →

- 0

**14. Your current monthly income.** Subtract the total in line 13 from line 12.

\$ 0

**15. Calculate your current monthly income for the year.** Follow these steps:

15a. Copy line 14 here →        \$ \_\_\_\_\_

Multiply line 15a by 12 (the number of months in a year).

x 12

\$ 0

15b. The result is your current monthly income for the year for this part of the form.

Debtor 1 Charise Lason Harrell  
 First Name Middle Name Last Name

Case number (if known) 1-18-41756-nhl

16. Calculate the median family income that applies to you. Follow these steps:

16a. Fill in the state in which you live. NY

16b. Fill in the number of people in your household. 1

16c. Fill in the median family income for your state and size of household.

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

\$ 162ch  
52,024

17. How do the lines compare?

- 17a.  Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, *Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3.* Do NOT fill out *Calculation of Your Disposable Income* (Official Form 122C-2).
- 17b.  Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, *Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income* (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above.

**Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)**

18. Copy your total average monthly income from line 11. ....

\$ 362

19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.

19a. If the marital adjustment does not apply, fill in 0 on line 19a. ....

- \$ \_\_\_\_\_

19b. Subtract line 19a from line 18.

\$ \_\_\_\_\_

20. Calculate your current monthly income for the year. Follow these steps:

20a. Copy line 19b.....

\$ \_\_\_\_\_

Multiply by 12 (the number of months in a year).

x 12

20b. The result is your current monthly income for the year for this part of the form.

\$ \_\_\_\_\_

20c. Copy the median family income for your state and size of household from line 16c. ....

\$ 362 ch

52,024

21. How do the lines compare?

- Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment period is 3 years.* Go to Part 4.
- Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, *The commitment period is 5 years.* Go to Part 4.

**Part 4: Sign Below**

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

X Charise Harrell

Signature of Debtor 1

Date 4/19/2018  
 MM / DD / YYYY

X

Signature of Debtor 2

Date \_\_\_\_\_  
 MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

<b>Fill in this information to identify your case:</b>			
Debtor 1	<u>Charise</u>	<u>Lavon</u>	<u>Harrell</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u></u>	<u></u>	<u></u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>East</u> District of <u>New York</u>			
Case number (If known)	<u>1-18-41756</u>		

Check if this is an amended filing

Official Form 122C-2

## **Chapter 13 Calculation of Your Disposable Income**

04/16

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1).

To fill out this form, you will need your completed [Official Form 122C](#).  
**Commitment Period (Official Form 122C-1).**  
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

## **Part 1: Calculate Your Deductions from Your Income**

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C-1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C-1.

If expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form.

- 5. The number of people used in determining your deductions from income**  
Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

## National Standards

You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories—people who are under 65 and people who are 65 or older—because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

\$ | Self

154

**U.S. BANKRUPTCY COURT  
EASTERN DISTRICT OF  
NEW YORK**

Debtor 1

Charise Laron Harrell

Case number (if known) 1-18-41756-nhl

**People who are under 65 years of age**

7a. Out-of-pocket health care allowance per person \$ 0

7b. Number of people who are under 65 X 0

7c. Subtotal. Multiply line 7a by line 7b.

\$	_____
----	-------

Copy here → \$ \_\_\_\_\_

**People who are 65 years of age or older**

7d. Out-of-pocket health care allowance per person \$ 0

7e. Number of people who are 65 or older X 0

X	_____
---	-------

Copy here → + \$ \_\_\_\_\_

7f. Subtotal. Multiply line 7d by line 7e.

\$	_____
----	-------

\$	_____
----	-------

Copy here → ..... \$ \_\_\_\_\_

7g. Total. Add lines 7c and 7f.

**Local Standards** You must use the IRS Local Standards to answer the questions in lines 8-15.

Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:

- Housing and utilities – Insurance and operating expenses
- Housing and utilities – Mortgage or rent expenses

To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

8. **Housing and utilities – Insurance and operating expenses:** Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. \$ 0

9. **Housing and utilities – Mortgage or rent expenses:**

9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. \$ 0

9b. Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60.

Name of the creditor

Average monthly payment

\$ \_\_\_\_\_

\$ \_\_\_\_\_

+ \$ \_\_\_\_\_

\$ \_\_\_\_\_

9b. Total average monthly payment

Copy here → - \$ \_\_\_\_\_

Repeat this amount on line 33a.

9c. Net mortgage or rent expense.

Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this number is less than \$0, enter \$0.

\$	_____
----	-------

Copy here → ..... \$ \_\_\_\_\_

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim. \$ 0

Explain why:

Debtor 1

Charisse Lavon Harrell

Case number (if known)

1-18-41756-nhl

First Name Middle Name Last Name

11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense.

0. Go to line 14.  
 1. Go to line 12.  
 2 or more. Go to line 12.

12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area.

\$ 0

13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles.

Vehicle 1

Describe Vehicle 1:

13a. Ownership or leasing costs using IRS Local Standard ..... \$ \_\_\_\_\_

13b. Average monthly payment for all debts secured by Vehicle 1.

Do not include costs for leased vehicles.

To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Name of each creditor for Vehicle 1

Average monthly payment

\$ \_\_\_\_\_

+ \$ \_\_\_\_\_

Total average monthly payment

\$ \_\_\_\_\_

Copy here →

-\$ \_\_\_\_\_

Repeat this amount on line 33b.

Copy net Vehicle 1 expense here →

\$ \_\_\_\_\_

13c. Net Vehicle 1 ownership or lease expense

Subtract line 13b from line 13a. If this number is less than \$0, enter \$0. ....

Vehicle 2

Describe Vehicle 2:

13d. Ownership or leasing costs using IRS Local Standard ..... \$ \_\_\_\_\_

13e. Average monthly payment for all debts secured by Vehicle 2.

Do not include costs for leased vehicles.

Name of each creditor for Vehicle 2

Average monthly payment

\$ \_\_\_\_\_

+ \$ \_\_\_\_\_

Total average monthly payment

\$ \_\_\_\_\_

Copy here →

-\$ \_\_\_\_\_

Repeat this amount on line 33c.

Copy net Vehicle 2 expense here →

\$ \_\_\_\_\_

13f. Net Vehicle 2 ownership or lease expense

Subtract line 13e from 13d. If this number is less than \$0, enter \$0. ....

14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the Public Transportation expense allowance regardless of whether you use public transportation.

\$ \_\_\_\_\_

15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for Public Transportation.

\$ 0

Debtor 1

Charese Lavon Harrell

Case number (if known) 1-18-41756-nhl

**Other Necessary Expenses**

In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.

16. **Taxes:** The total monthly amount that you actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.  
Do not include real estate, sales, or use taxes. \$ 0
17. **Involuntary deductions:** The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.  
Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. \$ 0
18. **Life insurance:** The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance.  
Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term. \$ 0
19. **Court-ordered payments:** The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.  
Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. \$ 0
20. **Education:** The total monthly amount that you pay for education that is either required:  
 as a condition for your job, or  
 for your physically or mentally challenged dependent child if no public education is available for similar services. \$ 6
21. **Childcare:** The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.  
Do not include payments for any elementary or secondary school education. \$ 0

22. **Additional health care expenses, excluding insurance costs:** The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.  
Payments for health insurance or health savings accounts should be listed only in line 25. \$ 6

23. **Optional telephones and telephone services:** The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.  
Do not include payments for basic home telephone, internet or cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Form 122C-1, or any amount you previously deducted. + \$ 6

24. Add all of the expenses allowed under the IRS expense allowances.  
Add lines 6 through 23.

**Additional Expense Deductions** These are additional deductions allowed by the Means Test.  
Note: Do not include any expense allowances listed in lines 6-24.

25. **Health insurance, disability insurance, and health savings account expenses.** The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.

Health insurance \$ 0Disability insurance \$ 0Health savings account + \$ 0Total \$ 0Copy total here → ..... \$ 0

Do you actually spend this total amount?

 No. How much do you actually spend? \$ 0 Yes

26. **Continuing contributions to the care of household or family members.** The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b). \$ 0

27. **Protection against family violence.** The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.  
By law, the court must keep the nature of these expenses confidential. \$ 0

Debtor 1

Charise Lavon Harrell

Case number (if known)

1-18-41756-nhl

**28. Additional home energy costs.** Your home energy costs are included in your insurance and operating expenses on line 8.

If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs.

\$ \_\_\_\_\_

You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary.

**29. Education expenses for dependent children who are younger than 18.** The monthly expenses (not more than \$160.42\* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school.

\$ \_\_\_\_\_

You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23.

\* Subject to adjustment on 4/01/19, and every 3 years after that for cases begun on or after the date of adjustment.

\$ \_\_\_\_\_

**30. Additional food and clothing expense.** The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.

\$ \_\_\_\_\_

To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

You must show that the additional amount claimed is reasonable and necessary.

\$ \_\_\_\_\_

**31. Continuing charitable contributions.** The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 11 U.S.C. § 548(d)(3) and (4).

+ \$ \_\_\_\_\_

Do not include any amount more than 15% of your gross monthly income.

\$ \_\_\_\_\_

**32. Add all of the additional expense deductions.**

Add lines 25 through 31.

#### Deductions for Debt Payment

**33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e.**

Average monthly payment

##### Mortgages on your home

33a. Copy line 9b here ..... → \$ 0

##### Loans on your first two vehicles

33b. Copy line 13b here ..... → \$ \_\_\_\_\_

33c. Copy line 13e here ..... → \$ \_\_\_\_\_

33d. List other secured debts:

Name of each creditor for other secured debt

Identify property that secures the debt

Does payment include taxes or insurance?

No

\$ \_\_\_\_\_

Yes

\$ \_\_\_\_\_

No

+ \$ \_\_\_\_\_

Yes

\$ \_\_\_\_\_

33e. Total average monthly payment. Add lines 33a through 33d. ....

Copy total here →

0

Debtor 1

Charise Lavor Harrell

Case number (if known)

1-18-41756-nhl

**34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?**

No. Go to line 35.

Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the *cure amount*). Next, divide by 60 and fill in the information below.

Name of the creditor	Identify property that secures the debt	Total cure amount	Monthly cure amount
_____	_____	\$ _____	+ 60 = \$ _____
_____	_____	\$ _____	+ 60 = \$ _____
_____	_____	\$ _____	+ 60 = + \$ _____
		Total	\$ _____
			<b>Copy total here ➔</b> \$ _____

**35. Do you owe any priority claims—such as a priority tax, child support, or alimony—that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.**

No. Go to line 36.

Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.

Total amount of all past-due priority claims. ..... \$ \_\_\_\_\_ + 60 \$ \_\_\_\_\_

**36. Projected monthly Chapter 13 plan payment**

\$ \_\_\_\_\_

Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).

To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

x \_\_\_\_\_

Average monthly administrative expense

\$ \_\_\_\_\_ \$ \_\_\_\_\_

**Copy total here ➔**

\$ \_\_\_\_\_

37. Add all of the deductions for debt payment. Add lines 33e through 36.

**Total Deductions from Income**

**38. Add all of the allowed deductions.**

Copy line 24, All of the expenses allowed under IRS expense allowances ..... \$ \_\_\_\_\_

Copy line 32, All of the additional expense deductions ..... \$ \_\_\_\_\_

Copy line 37, All of the deductions for debt payment ..... + \$ \_\_\_\_\_

Total deductions ..... \$ \_\_\_\_\_

**Copy total here ➔**

\$ \_\_\_\_\_

Debtor 1

Charise Lavon Harrell

First Name

Middle Name

Last Name

Case number (if known)

1-18-41756-nhl

**Part 2:****Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2)**

39. Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period. .... \$ 0

40. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child. .... \$ 0

41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19). .... \$ 0

42. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here → \$ 0

43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses.

Describe the special circumstances

Amount of expense

\$ <u>0</u>
\$ <u>0</u>
+ \$ <u>0</u>
Total      \$ <u>0</u>

Copy here → + \$ 0

44. Total adjustments. Add lines 40 through 43. .... \$ 0 → - \$ 0

45. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39. .... \$ 0

**Part 3:****Change in Income or Expenses**

46. Change in income or expenses. If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase.

Form	Line	Reason for change	Date of change	Increase or decrease?	Amount of change
<input type="checkbox"/> 122C-1				<input type="checkbox"/> Increase	\$ <u> </u>
<input type="checkbox"/> 122C-2				<input type="checkbox"/> Decrease	\$ <u> </u>
<input type="checkbox"/> 122C-1				<input type="checkbox"/> Increase	\$ <u> </u>
<input type="checkbox"/> 122C-2				<input type="checkbox"/> Decrease	\$ <u> </u>
<input type="checkbox"/> 122C-1				<input type="checkbox"/> Increase	\$ <u> </u>
<input type="checkbox"/> 122C-2				<input type="checkbox"/> Decrease	\$ <u> </u>
<input type="checkbox"/> 122C-1				<input type="checkbox"/> Increase	\$ <u> </u>
<input type="checkbox"/> 122C-2				<input type="checkbox"/> Decrease	\$ <u> </u>

Debtor 1

Charise Lavon Harrell

First Name

Middle Name

Last Name

Case number (if known)

1-18-41756-nhl**Part 4:****Sign Below**

By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.

x Charise Harrell

Signature of Debtor 1

Date 4/18/2018  
MM / DD / YYYY

x

Signature of Debtor 2

Date \_\_\_\_\_  
MM / DD / YYYY

UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF NEW YORK  
www.nyeb.uscourts.gov

STATEMENT PURSUANT TO LOCAL  
BANKRUPTCY RULE 1073-2(b)

DEBTOR(S): Charise Lavor Harrell CASE NO.: 1-18-41756

Pursuant to Local Bankruptcy Rule 1073-2(b), the debtor (or any other petitioner) hereby makes the following disclosure concerning Related Cases, to the petitioner's best knowledge, information and belief:

[NOTE: Cases shall be deemed "Related Cases" for purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case was pending at any time within eight years before the filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are spouses or ex-spouses; (iii) are affiliates, as defined in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a partnership and one or more of its general partners; (vi) are partnerships which share one or more common general partners; or (vii) have, or within 180 days of the commencement of either of the Related Cases had, an interest in property that was or is included in the property of another estate under 11 U.S.C. § 541(a).]

NO RELATED CASE IS PENDING OR HAS BEEN PENDING AT ANY TIME.

THE FOLLOWING RELATED CASE(S) IS PENDING OR HAS BEEN PENDING:

1. CASE NO.: \_\_\_\_\_ JUDGE: \_\_\_\_\_ DISTRICT/DIVISION: \_\_\_\_\_

CASE STILL PENDING: (YES/NO): \_\_\_\_\_ *If closed/* Date of closing: \_\_\_\_\_

CURRENT STATUS OF RELATED CASE: \_\_\_\_\_  
(Discharged/awaiting discharge, confirmed, dismissed, etc.)

MANNER IN WHICH CASES ARE RELATED (*Refer to NOTE above*): \_\_\_\_\_

REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ('REAL PROPERTY') WHICH WAS ALSO LISTED IN  
SCHEDULE "A" OF RELATED CASES: \_\_\_\_\_

2. CASE NO.: \_\_\_\_\_ JUDGE: \_\_\_\_\_ DISTRICT/DIVISION: \_\_\_\_\_

CASE STILL PENDING: (YES/NO): \_\_\_\_\_ *If closed/* Date of closing: \_\_\_\_\_

CURRENT STATUS OF RELATED CASE: \_\_\_\_\_  
(Discharged/awaiting discharge, confirmed, dismissed, etc.)

MANNER IN WHICH CASES ARE RELATED (*Refer to NOTE above*): \_\_\_\_\_

REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ('REAL PROPERTY') WHICH WAS ALSO LISTED IN  
SCHEDULE "A" OF RELATED CASES: \_\_\_\_\_

[OVER]

**DISCLOSURE OF RELATED CASES (cont'd)**

3. CASE NO.: \_\_\_\_\_ JUDGE: \_\_\_\_\_ DISTRICT/DIVISION: \_\_\_\_\_

CASE STILL PENDING: (YES/NO): \_\_\_\_\_ *If closed* Date of closing: \_\_\_\_\_

CURRENT STATUS OF RELATED CASE: \_\_\_\_\_  
(Discharged/awaiting discharge, confirmed, dismissed, etc.)

MANNER IN WHICH CASES ARE RELATED (*Refer to NOTE above*): \_\_\_\_\_

REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ('REAL PROPERTY') WHICH WAS ALSO LISTED IN  
SCHEDULE "A" OF RELATED CASES: \_\_\_\_\_

NOTE: Pursuant to 11 U.S.C. § 109(g), certain individuals who have had prior cases dismissed within the preceding 180 days may not be eligible to be debtors. Such an individual will be required to file a statement in support of his/her eligibility to file.

**TO BE COMPLETED BY DEBTOR/PETITIONER'S ATTORNEY, AS APPLICABLE:**

I am admitted to practice in the Eastern District of New York (Y/N): \_\_\_\_\_

**CERTIFICATION (to be signed by pro-se debtor/petitioner or debtor/petitioner's attorney, as applicable):**

I certify under penalty of perjury that the within bankruptcy case is not related to any case now pending or pending at any time, except as indicated elsewhere on this form.

\_\_\_\_\_  
Signature of Debtor's Attorney

*Charise Harrell*  
\_\_\_\_\_  
Signature of Pro-se Debtor/Petitioner

*47 Markham Lane # 1B*  
\_\_\_\_\_  
Mailing Address of Debtor/Petitioner

*Staten Island, NY 10310*  
\_\_\_\_\_  
City, State, Zip Code

*charise.harrell.84@gmail.com*  
\_\_\_\_\_  
Email Address

*347 355 - 8801*  
\_\_\_\_\_  
Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

**NOTE: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.**